



Millennium High School Application Checklist

Thank you for your interest in Millennium High School. To ensure that your application is reviewed promptly, please use the following checklist. Only complete applications will be reviewed. Return completed applications and recommendation documents to:

**Millennium High School
Interdistrict Transfers
760 Magnolia Avenue
Piedmont, CA 94611**

- **PUSD Student Enrollment Form**
- **MHS Student Responses**
- **MHS Student Work Samples From Current School Year (2)**
- **MHS Student Agreements**
- **MHS Parent/ Guardian Agreements**
- **Current School Discipline/Behavior Report**
- **Current School Attendance Report**
- **Current English Teacher Recommendation Form**
- **Current Math Teacher Recommendation Form**
- **Current Counselor/Principal Recommendation Form**
- **Current transcripts**
- **A copy of student's birth certificate**
- **Current immunization records with proof of current Tdap vaccination**
- **A Copy of applicant's most recent IEP, 504 Plan, General Education Plan, etc.**
(if applicable) - For students with an IEP, the most recent triennial with all testing included is required.

NOTE: It is NOT necessary to get an IDT from your resident home district before applying. If accepted, applying for an IDT will be the second step in the process.

Please note: All of the above documents are necessary to evaluate Millennium High School's capacity to serve your student. Failure to provide any of the above documents in your initial application may result in the rescinding of any offer of placement at MHS.

– OFFICIAL USE ONLY –

Immunizations: _____

TB: _____

Initials: _____ Date: _____

Piedmont Unified School District
STUDENT ENROLLMENT FORM

– OFFICIAL USE ONLY –

Today's Date: _____

Grade: _____

Student's LEGAL Name: *(from birth certificate)* _____

Birth Date: ____/____/____

Gender: ☐ Male ☐ Female

Last First Middle Suffix

ETHNICITY

☐ Hispanic/Latino (A person of Spanish culture or origin, regardless of race)

☐ Not Hispanic or Latino

RACE Please check up to five racial categories. No matter what you selected above, please continue to answer the following by marking one or more boxes to indicate what you consider your child's race to be.

☐ American Indian / Alaskan Native (100)
(Original peoples of North, Central or South America)

☐ Laotian (206)

☐ Tahitian (304)

☐ Cambodian (207)

☐ Other Pacific Islander (399)

☐ Chinese (201)

☐ Hmong (208)

☐ Filipino/Filipino American (400)

☐ Japanese (202)

☐ Other Asian (299)

☐ Black (600)

☐ Korean (203)

☐ Hawaiian (301)

☐ White (700)

☐ Vietnamese (204)

☐ Guamanian (302)

*(Original peoples of Europe, North Africa,
or the Middle East)*

☐ Asian Indian (205)

☐ Samoan (303)

Nickname/goes by: _____

My child currently receives services under ☐ 504 plan ☐ IEP

OTHER CHILDREN IN THE FAMILY

Name	Relationship	Birthdate	Lives at home?	School	Grade
_____	_____	____/____/____	☐ Yes ☐ No	_____	_____
_____	_____	____/____/____	☐ Yes ☐ No	_____	_____
_____	_____	____/____/____	☐ Yes ☐ No	_____	_____
_____	_____	____/____/____	☐ Yes ☐ No	_____	_____

Student resides with:

Parent/Guardian Last Name First Name () Work Phone () Cell Phone

Relationship to Student Occupation Email

Parent/Guardian Last Name First Name () Work Phone () Cell Phone

Relationship to Student Occupation Email

Address: _____
City Zip

Home Phone () _____ **Grade:** _____

Last school attended: _____
Name of School Address / City / State / Zip Grade(s) Last Day of Attendance

Has your child ever been enrolled in a California school? ☐ Yes ☐ No ... if Yes, please indicate the city: _____

Did your child attend preschool in the U.S.? ☐ Yes ☐ No ... if Yes, please indicate # of years: _____

Last

First

Middle

Suffix

HOME LANGUAGE SURVEY:

1. Which language did your child learn when he/she first began to talk? _____
2. Which language does your child most frequently speak at home? _____
3. Which language do you (the parents or guardians) most frequently use when speaking with your child? _____
4. Which language is most often spoken by adults in the home? (parents, guardians, grandparents, or any other adults) _____

For **Chinese**,
please designate
Cantonese
or
Mandarin

Has your child ever been given the California English Language Development Test (CELDT)? ☐ Yes ☐ No ☐ I don't know

Date of Birth: ____/____/____
Month Day Year

Birth Country: _____

Birth Verification ☐ Birth certificate ☐ Passport

Birth State: _____

Birth City: _____

If not born in the US:

First entered the US ____/____/____
Month/Day/Year

First attended school in the US ____/____/____
Month/Day/Year

First attended school in California ____/____/____
Month/Day/Year

PARENT EDUCATION LEVEL – Check the response that describes the highest education level of parent/guardian(s):

- ☐ Graduate school/post graduate training ☐ Some college (includes AA degree) ☐ Not a high school graduate
☐ College graduate ☐ High school graduate

Secondary Residence: (if applicable)

Address: _____ City _____ State _____ Zip _____

Parent/Guardian Last Name _____ First Name _____ Home Phone _____ Work Phone _____ Cell Phone _____

Relationship to Student _____ Occupation _____ Email _____

Parent/Guardian Last Name _____ First Name _____ Home Phone _____ Work Phone _____ Cell Phone _____

Relationship to Student _____ Occupation _____ Email _____

If there is a legal custody agreement regarding this student, please check one: ☐ Joint Custody ☐ Sole Custody ☐ Guardian
Send duplicate mailings to Secondary Residence? ☐ Yes ☐ No

FOR KINDERGARTEN STUDENTS ONLY:

Placement Request: ☐ Morning (8:30 a.m. – 11:45 a.m.) ☐ Afternoon (11:45 a.m. – 3:10 p.m.) ☐ No preference

Information to consider: _____

FOR HIGH SCHOOL STUDENTS ONLY:

Student Cell (_____) _____ Student Email _____

I (We) declare, under penalty of perjury, that I am (we are) the parent(s) or court-appointed legal guardian(s) of the above named student and that he/she lives with me (us) at the Piedmont address noted above.

Date: _____ Signature of Parent/Guardian: _____

Date: _____ Signature of Parent/Guardian: _____

RESIDENCY VERIFICATION: ☐ Grant Deed ☐ Property Tax Statement ☐ Rental/Lease Contract ☐ Property Owner's Business Tax License
☐ Tax return ☐ W-2 ☐ Bank statement ☐ PG&E/EBMUD ☐ Major credit card ☐ Other _____

Completed by: _____ Date: _____

Rev. 2/4/15



MHS Application - Student Responses
*This page **must be filled out by the student applicant.***

Why are you interested in Millennium High School?

What kinds of things interest you?

What activities are you involved in outside of school?

Describe any health concerns or physical limitations that could affect your school participation.

For Transfer Students Only:

What are your reasons for leaving your current school?

Describe any special circumstances which may have impacted your ability to do your best work?

Have you been expelled or asked not to return to your current school? Yes____ No____

Explain:



MHS Application - Student Work Samples

Please scan and send in with your application TWO WORK SAMPLES that you are proud of. Both should be from this past school year. One should be from **English** or **History** class and show your writing skills. The other should be from science or math class and show your numeracy and analytical skills.

Work Sample #1

What is it?

Why are you proud of it?

Work Sample #2

What is it?

Why are you proud of it?



MHS Student Agreements

For a student to be successful at MHS, she or he must want to attend our school and must commit to try hard, follow school policies and attend regularly. Failure to do so may result in a student's Inter-District Transfer being rescinded.

Student please initial acknowledging the following:

Participation:

- ☐ I will participate in school activities
- ☐ I will participate in community projects
- ☐ I will participate in class

Attendance:

- ☐ I will attend grade level academy classes
- ☐ I will attend tutorial regularly when I need help
- ☐ I will attend tutorial when assigned to tutorial
- ☐ I understand I will be assigned detention if I have 3 or more tardies in a week or cut a class

Academic Probation:

- ☐ I will earn 1.5-2 credits in each class each marking period
- ☐ I will earn 5 credits in each class each semester
- ☐ I will maintain a positive attitude/positive behavior

Student signature: _____ Date: _____



MHS Parent/ Guardian Agreements

For a student to be successful at MHS, we require regular contact with, support from and participation from families.

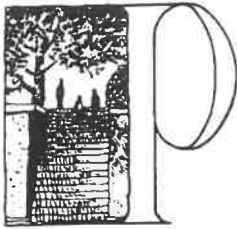
Parent or Guardian, please initial acknowledging the following:

- _____ I/We will participate in the Millennium High School community by attending Parent Club meetings, Back to School Night, showcases, Millennium Community Dinner/Fundraisers as regularly as possible.
- _____ I/We will partner with teachers and school administrators to help our student succeed in their education at Millennium High School.
- _____ I/We will ensure our student is at school on time and attending regularly.
- _____ I/We will ensure our student participates in school-wide activities and trips.

Please sign below acknowledging the above.

Parent/Guardian Signature _____ Date: _____

Parent/Guardian Signature _____ Date: _____



PIEDMONT UNIFIED SCHOOL DISTRICT

MILLENNIUM HIGH SCHOOL

760 Magnolia Avenue • Piedmont, California 94611-4088 • (510) 594-2703

Current Mathematics Teacher Recommendation Form

To the Applicant: Please type or print your name and give this form to your current Mathematics teacher with a stamped envelope addressed to Millennium High School.

Applicant name: _____ Applying for Grade: _____

To the Parent/Guardian: Please read and sign the statement below.

For the student named above, I authorize the release of school records, including an official transcript of all grades for the past two years as well as academic testing results. I acknowledge that I waive my right to read the confidential teacher recommendations and the school report.

Signature of Applicant's Parent or Guardian: _____ Date: _____

To the Teacher: This recommendation will remain confidential and will not become part of the student's permanent record. Please be sure the parent has signed above. We sincerely appreciate your cooperation and candor.

Compared to other students in his or her class year, how do you rate the student in terms of:

Academic Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Study habits						
	Attention span						
	Ability to work independently						
	Ability to organize and communicate ideas						
	Motivation						
	Intellectual curiosity						
	Critical and abstract thinking skills						

Personal Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Creativity						
	Self-confidence						
	Leadership potential						
	Reaction to criticism						
	Reaction to setbacks						
	Concern for others						
	Personal conduct						
	Personal integrity						
	Ability to act independently						
	Ability to work cooperatively						
	General level of maturity						
	Sense of humor						

1. This student is enrolled in: ☐ Arithmetic ☐ Pre-algebra ☐ Algebra ☐ Geometry ☐ Other: _____
 Section level of course: ☐ Remedial ☐ Regular ☐ Advanced ☐ Mixed-Ability
2. Please compare this student's academic achievement to his/her ability.

3. Please describe the student in Math. (Compare ability to retain mathematical relationships and principles, drawing generalizations, applying basic principles in word problems, and relying on memory versus conceptual processes.)

4. Have absences in any way affected the student's classroom performance?

5. Comment on the student as a person. (Consider maturity, integrity, behavior, and relationships with peers, self-confidence.)

6. Is there any additional information that can be better conveyed in a phone call? ☐ Yes ☐ No
☐ If Necessary
- a. Hours and phone number where you can be reached: _____
- b. Grade(s) you have taught this applicant: ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

Name _____ Position _____
 School Name _____ School Phone _____
 Email _____
 Signature _____ Date _____

I recommend this student

not at all

with reservation

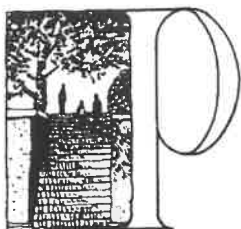
mildly

with confidence

enthusiastically

Academic ability and promise					
Character and promise					
Overall					

Please make any additional comments:



PIEDMONT UNIFIED SCHOOL DISTRICT

MILLENNIUM HIGH SCHOOL

760 Magnolia Avenue • Piedmont, California 94611-4088 • (510) 594-2703

Current English Teacher Recommendation Form

To the Applicant: Please type or print your name and give this form to your current English teacher with a stamped envelope addressed to Millennium High School.

Applicant name: _____

Applying for Grade: _____

To the Parent/Guardian: Please read and sign the statement below.

For the student named above, I authorize the release of school records, including an official transcript of all grades for the past two years as well as academic testing results. I acknowledge that I waive my right to read the confidential teacher recommendations and the school report.

Signature of Applicant's Parent or Guardian: _____ Date: _____

To the Teacher: This recommendation will remain confidential and will not become part of the student's permanent record. Please be sure the parent has signed above. We sincerely appreciate your cooperation and candor.

Compared to other students in his or her class year, how do you rate the student in terms of:

Academic Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Study habits						
	Attention span						
	Ability to work independently						
	Ability to organize and communicate ideas						
	Motivation						
	Intellectual curiosity						
	Critical and abstract thinking skills						

Personal Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Creativity						
	Self-confidence						
	Leadership potential						
	Reaction to criticism						
	Reaction to setbacks						
	Concern for others						
	Personal conduct						
	Personal integrity						
	Ability to act independently						
	Ability to work cooperatively						
	General level of maturity						
	Sense of humor						

1. Please compare this student's academic achievement to his/her ability.

2. Comment on this student's reading and writing skills.

3. In this student's academic work, does he or she require prodding or additional supervision? Please elaborate.

4. Have absences in any way affected the student's classroom performance?

5. Comment on the student as a person. (Consider maturity, integrity, behavior, and relationships with peers, self-confidence.)

6. Is there any additional information that can be better conveyed in a phone call? ☐ Yes ☐ No
☐ If Necessary

a. Hours and phone number where you can be reached: _____

b. Grade(s) you have taught this applicant: ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

Name _____ Position _____

School Name _____ School Phone _____

Email _____

Signature _____ Date _____

I recommend this student

not at all

with reservation

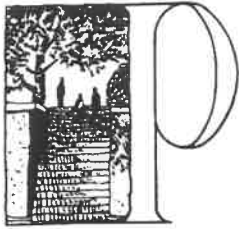
mildly

with confidence

enthusiastically

Academic ability and promise					
Character and promise					
Overall					

Please make any additional comments:



PIEDMONT UNIFIED SCHOOL DISTRICT

MILLENNIUM HIGH SCHOOL

760 Magnolia Avenue • Piedmont, California 94611-4088 • (510) 594-2703

Current Principal/Counselor Recommendation Form

To the Applicant: Please type or print your name and give this form to your current Principal/Counselor with a stamped envelope addressed to Millennium High School.

Applicant name: _____ Applying for Grade: _____

To the Parent/Guardian: Please read and sign the statement below.

For the student named above, I authorize the release of school records, including an official transcript of all grades for the past two years as well as academic testing results. I acknowledge that I waive my right to read the confidential teacher recommendations and the school report.

Signature of Applicant's Parent or Guardian: _____ Date: _____

To the Principal/Counselor: This recommendation will remain confidential and will not become part of the student's permanent record. Please be sure the parent has signed above. We sincerely appreciate your cooperation and candor.

Compared to other students in his or her class year, how do you rate the student in terms of:

Academic Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Study habits						
	Attention span						
	Ability to work independently						
	Ability to organize and communicate ideas						
	Motivation						
	Intellectual curiosity						
	Critical and abstract thinking skills						

Personal Qualities

NO OPPORTUNITY TO OBSERVE		POOR	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE BEST EVER
	Creativity						
	Self-confidence						
	Leadership potential						
	Reaction to criticism						
	Reaction to setbacks						
	Concern for others						
	Personal conduct						
	Personal integrity						
	Ability to act independently						
	Ability to work cooperatively						
	General level of maturity						
	Sense of humor						

1. For how long and in what context have you known this student?

2. Please comment on this applicant's special interests, talents, and abilities.

3. Should the admission committee be made aware of any factors or disciplinary action that has had an impact on this student's academic or social progress to date?

4. Comment on the student as a person. (Consider maturity, integrity, behavior, and relationships with peers, self-confidence.)

5. Is there any additional information that can be better conveyed in a phone call? ☐ Yes ☐ No
☐ If Necessary

- a. Hours and phone number where you can be reached: _____

Name _____ Position _____

School Name _____ School Phone _____

Email _____

Signature _____ Date _____

I recommend this student	not at all	with reservation	mildly	with confidence	enthusiastically
Academic ability and promise					
Character and promise					
Overall					

Please make any additional comments:

[illegible]